Award# 6 NU62PS924782-03-02 FAIN# NU62PS924782

Federal Award Date: 02/11/2025

Recipient Information

1. Recipient Name

ST. JOHN'S COMMUNITY HEALTH

808 W 58th St

Los Angeles, CA 90037-3632

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2. Congressional District of Recipient

- 3. Payment System Identifier (ID)
- 4. Employer Identification Number (EIN)
- 5. Data Universal Numbering System (DUNS)
- 6. Recipient's Unique Entity Identifier (UEI)

7. Project Director or Principal Investigator

Mr. Kazumi Yamaguchi

Principal Investigator

kyamaguchi@wellchild.org

323-541-1600 ex 2335

8. Authorized Official

Ms Elena Fernandez

Business Official

efernandez@wellchild.org

323-541-1600 ex 1467

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mrs. Benita Bosier-Ingram

Grant Management Specialist

ula8@cdc.gov

404-638-7434

10.Program Official Contact Information

Miss Carla Galindo

Behavioral Scientist

fco4@cdc.gov

404-639-1902

Federal Award Information

11. Award Number

6 NU62PS924782-03-02

12. Unique Federal Award Identification Number (FAIN)

NU62PS924782

13. Statutory Authority

Sections 301 and 318(b) of the Public Health Service Act; 42 USC Sections 241 and 247c(a), as amended

14. Federal Award Project Title

St. John's Community Health: Community to Clinic Transgender Program

15. Assistance Listing Number

93 944

16. Assistance Listing Program Title

Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance

17. Award Action Type

NGA Revision

18. Is the Award R&D?

No

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19.	Budget Period Start Date	06/30/2024	- End Date	06/29/2025	

20. Total Amount of Federal Funds Obligated by this Action		
	20a. Direct Cost Amount	\$0.00
	20b. Indirect Cost Amount	\$0.00
	21. Authorized Carryover	\$0.00

22. Offset

23. Total Amount of Federal Funds Obligated this budget period \$500,000.00

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved this Budget Period \$500,000.00

26. Period of Performance Start Date 06/30/2022 - End Date 06/29/2026

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance

\$1,418,845.00

\$0.00

\$0.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Stephanie Latham

Team Lead, Grants Management Officer

30. Remarks

DEPARTMENT OF HEALTH AND HU

Centers for Disease Control and Prevention

Award# 6 NU62PS924782-03-02 FAIN# NU62PS924782

Federal Award Date: 02/11/2025

Recipient Information

Recipient Name

ST. JOHN'S COMMUNITY HEALTH 808 W 58th St

Los Angeles, CA 90037-3632

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Congressional District of Recipient

27

Payment Account Number and Type

Employer Identification Number (EIN) Data

Universal Numbering System (DUNS)

Recipient's Unique Entity Identifier (UEI)

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

33.	Approved	Bud	lget
(P	-l., d Di	- A -	-1-4-

(Excludes Direct Assistance)

- I. Financial Assistance from the Federal Awarding Agency Only
- II. Total project costs including grant funds and all other financial participation

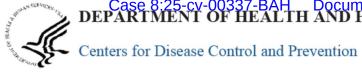
ii. Total project costs including grant lunds and all other infancial participation				
a. Salaries and Wages	\$265,879.00			
b. Fringe Benefits	\$53,176.00			
c. TotalPersonnelCosts	\$319,055.00			
d. Equipment	\$0.00			
e. Supplies	\$50,144.00			
f. Travel	\$20,870.00			
g. Construction	\$0.00			
h. Other	\$22,246.00			
i. Contractual	\$87,685.00			
j. TOTAL DIRECT COSTS	\$500,000.00			
k. INDIRECT COSTS	\$0.00			
I. TOTAL APPROVED BUDGET	\$500,000.00			
m. Federal Share	\$500,000,00			

n. Federal Share \$500,000.00

n. Non-Federal Share \$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
2-9390JT6	22NU62PS924782	PS	41.51	93.944	\$0.00	75-22-0950
3-9390JT6	22NU62PS924782	PS	41.51	93.944	\$0.00	75-23-0950
4-9390JT6	22NU62PS924782	PS	41.51	93.944	\$0.00	75-24-0950



Award# 6 NU62PS924782-03-02 FAIN# NU62PS924782

Federal Award Date: 02/11/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

ST. JOHN'S COMMUNITY HEALTH

6 NU62PS924782-03-02

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

In compliance with the Temporary Restraining Order issued on January 31, 2025, in the United States District Court in the District of Rhode Island, the purpose of this amendment is to **rescind** the **Termination** Notice of Award issued January 31, 2025.

All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.